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**RAWMARSH
URBAN DISTRICT COUNCIL**



ANNUAL REPORTS

OF THE

**MEDICAL OFFICER
OF HEALTH**

AND THE

SANITARY INSPECTOR

FOR

1955

RAWMARSH URBAN DISTRICT COUNCIL

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Medical Officer of Health :

D. J. CUSITER, M.B., Ch.B., D.P.H., D.T.M., and H.

Sanitary Inspector :

G. RAWLINSON, Cert. R.S.I. and S.I.E.J.B.



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RAWMARSH URBAN DISTRICT COUNCIL

Annual Report of the Medical Officer of Health for the year 1955

Public Health Department,
Dunford House,
Doncaster Road,
Wath upon Dearne.

*To the Chairman and Members of the
Rawmarsh Urban District Council.*

Mr. Chairman, Madam and Gentlemen,

I have the honour to submit to you the Annual Report on the health of the district for 1955.

There were only six infant deaths giving an infant mortality of 17.5 per thousand, the lowest rate ever recorded in the district and this in spite of a higher than national birth rate. There was no maternal death for the fifth consecutive year. There was an extensive outbreak of measles but only 1 case of poliomyelitis with complete recovery. To have an infant mortality lower than both the national rate and the County rate is something to be pleased about.

The housing progress was satisfactory as far as building houses is concerned, but there are more than 436 unfit for habitation according to the Housing Acts and these houses do not improve as the years go by. It was only found possible to demolish four houses. I am pleased to report that a further 7 huts were demolished at the Red Ash Hill Estate. It is very difficult to forecast when the last of the huts will be closed or demolished but they are not suitable for young children, in winter particularly, and cause me much anxiety. Good housing is as important to the health of the district as all the Health Services, without it, our efforts to promote health will not meet with full success.

In all my work I have been greatly assisted by Mr. Rawlinson, Chief Sanitary Inspector, and by Mr. James, who served the district for 25 years. I would like to thank the Members of the Council and officials for their ready support and the Family Doctors and my own Health Staff who have made these satisfactory health statistics a possibility.

I remain,

Your obedient servant,

D. J. CUSITER,

Medical Officer of Health.

Section A.

NATURAL AND SOCIAL CONDITIONS OF
RAWMARSH URBAN DISTRICT.

Area (in acres)	2,607
Population (Census 1951)	18,789
Natural increase of the Population	136
Registrar General's Estimate of Resident Population, mid 1955	19,540
Number of Inhabited Houses (Census 1931)	4,523
Number of Inhabited Houses (31st December, 1955)	6,049
Rateable Value	£91,285
Nett Product of a Penny Rate	£341
Height above Sea Level	64-380 ft.

There was no unemployment in the district and in fact in some industries a labour shortage was experienced.

COMPARATIVE VITAL STATISTICS FOR 1955.

	1955	1954	Eng. & Wales 1955
Live Birth rate per 1,000 population :			
Crude	17.51	17.71	15.0
Adjusted	17.33	17.53	*
Stillbirth rate per 1,000 population	0.41	0.58	*
Death rate per 1,000 population :			
Crude	10.54	10.61	11.7
Adjusted	12.33	12.41	*
Infant Mortality rate per 1,000 live births	17.54	32.64	24.9
Neo-Natal Death rate per 1,000 live births	14.62	26.71	17.3
Maternal Mortality rate per 1,000 births	Nil	Nil	0.64

* Figures not available.

VITAL STATISTICS FOR 1955 IN DETAIL.

	Males	Females	Total
Live Births : Legitimate	165	167	332
Illegitimate	6	4	10
Total Live Births			342
Stillbirths : Legitimate	3	4	7
Illegitimate	1	—	1
Deaths of Infants under one year :			
Legitimate	2	4	6
Illegitimate	—	—	—
Deaths : All Ages	114	92	206
Stillbirths :			
Rate per 1,000 births		22.86	
Comparability Factors :			
Births		0.99	
Deaths		1.17	

	Deaths	Death Rate per 1,000 births
Deaths from Puerperal Causes :		
Puerperal and Post Abortive sepsis	Nil	—
Other Maternal Causes	Nil	—
Death Rate of Infants under one year :		
All Infants per 1,000 live births .. .. .	.. .. .	17.54
Legitimate Infants per 1,000 legitimate live births .. .. .	.. .. .	18.07
Illegitimate Infants per 1,000 illegitimate births .. .. .	.. .. .	Nil
Neo-Natal Death Rate .. .. .	.. .. .	14.62

Causes of Death in 1955.

	Males	Females
1. Tuberculosis (Respiratory)	2	—
2. Tuberculosis (Other)	Nil	—
3. Syphilitic disease	—	1
4. Diphtheria	—	—
5. Whooping Cough	—	—
6. Meningococcal Infections	—	—
7. Acute Poliomyelitis	—	—
8. Measles	—	—
9. Other infective and parasitic diseases	—	—
10. Cancer of Stomach	7	2
11. Cancer of Lungs or Bronchus	5	—
12. Cancer of Breast	1	2
13. Cancer of Uterus	—	2
14. Other Cancer or Lymphatic Cancer	7	6
15. Leukaemia or Aleukaemia	—	2
16. Diabetes	1	1
17. Vascular Lesions of the Nervous System	9	14
18. Coronary disease or Angina	15	10
19. Hypertension with Heart disease	7	5
20. Other Heart disease	12	17
21. Other Circulatory disease	7	10
22. Influenza	1	—
23. Pneumonia	5	—
24. Bronchitis	14	6
25. Other Diseases of respiratory system	2	—
26. Ulcer of Stomach or Duodenum	2	2
27. Gastritis, Enteritis or Diarrhoea	1	—
28. Nephritis or Nephrosis	—	—
29. Enlarged Prostate	—	—
30. Pregnancy, Childbirth or abortion	—	—
31. Congenital malformation	—	2
32. Other defined or ill-defined diseases	5	8
33. Motor vehicle accidents	5	1
34. All other accidents	2	1
35. Suicide	4	—
36. Homicide or operations of war	—	—
Totals	114	92

There were only 2 deaths from Pulmonary Tuberculosis, 6 deaths as the result of motor vehicle accidents, 20 from bronchitis and 5 from cancer of the lung or bronchus. The majority of deaths being due to heart disease and strokes and disease of the blood vessels—all conditions affecting older people.

Deaths of Infants under one year of age.

	Causes	Age	Died at
1.	Atelectasis	1 hour	Hospital
2.	Congenital Heart disease and Prematurity..	2 weeks	Hospital
3.	Prematurity	13 days	Hospital
4.	Congenital Heart disease	1 month	Home
5.	Intracranial Haemorrhage	1 day	Hospital
6.	Intracranial Haemorrhage and Prematurity	5 hours	Hospital

There were only 6 deaths in this category giving an infant mortality rate of 17.5 per 1000. This is the lowest rate ever recorded in Rawmarsh. The national rate being 24 and the County rate 26.2.

None of the infant deaths were due to infection, but were due to accidents of birth or prematurity or congenital abnormalities. Some of the causes of prematurity are known and are preventable with efficient ante-natal care commencing early in pregnancy. There is a tendency to avoid efficient ante-natal care and to engage a Family Doctor or Midwife late in pregnancy. This, if persisted in, will tend to increase the premature birth rate and eventually the Infant Mortality Rate. There is no substitute for ante-natal care.

Section B.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

Hospital Services.

These have been augmented by the addition of 12 beds for the care of Tuberculosis at the Mexborough Montagu Hospital. These were made available from September and it is hoped to gradually build the number of beds to 25. The Sanatorium at Wath Wood Hospital is now working to capacity and the full scale of treatment can now be given at the hospital including major chest surgery.

Ambulance Service.

The County Ambulance Service operate a depot at Dunford House where six vehicles are based. Three vehicles are equipped with wireless combined receivers and transmitters. Wireless messages are used for calling up vehicles whilst out on call. The drivers are instructed in first aid and all vehicles carry a wide range of emergency first aid equipment.

Miles patients carried : 166,723 miles.

Number of patients : Males—16,037.

Females—16,202.

The Depot Superintendent is Mr. F. Hyde.

All requests for the use of the Ambulance Service must be authorised by a doctor or hospital or midwife except in cases of emergency, i.e.,

accidents or maternity cases and sudden grave illness. The telephone number is Wath upon Dearne 2234. Close liaison is maintained between the Ambulance Service and the Medical Service.

Infectious Diseases by Wards.

Ward	Scarlet Fever	Pneu- monia	Dysen- tery	Whoop- ing Cough	Measles	Mening- occocal Infec- tion	Erysip- elas	Polio- myeli- tis	Totals
Ryecroft ..	2	—	1	20	67	—	—	—	90
Rosehill ..	—	—	1	5	89	—	—	—	95
South ..	—	1	—	9	67	—	—	1	78
Central ..	4	—	—	4	88	—	—	—	96
West ..	1	—	3	4	32	1	—	—	41
East ..	—	—	1	—	34	—	1	—	36
Totals ..	7	1	6	42	377	1	1	1	436

Scarlet Fever.

This disease is a mild illness compared to what it has been in the past. It is an infectious disease and isolation in the early stages is essential. In the case of food handlers and milk handlers special problems arise and where the patient is resident on food premises isolation in hospital is requested. Hospital isolation is necessary where effective isolation is not being carried out at home and severe cases should be admitted for specialist nursing care.

Dysentery.

This infectious intestinal complaint can be very troublesome, particularly in food handlers and in school children. There is a marked increase in the number of carriers who feel quite well but still harbour and excrete the organism from the bowel. Great difficulty was experienced in getting rid of the carrier state and it is apparent that many strains of Dysentery organisms are resistant to drugs.

Whooping Cough.

This disease is now the main infectious dangerous disease of infancy. Half the deaths from this cause occur in the first year of life and many more children are permanently crippled by the disease. Protection can be given up to a point by early immunisation, i.e., from the third month of age onwards.

Poliomyelitis.

There was only one case notified and this in spite of an extensive outbreak in the Valley towns of Barnsley, Wombwell, Swinton, Wath and Mexborough. The interesting observation here is that infectious disease in Rawmarsh usually follows the route Sheffield, Rotherham, Rawmarsh, whereas in Wath and Swinton the route is usually Barnsley, Wombwell, Wath, Swinton and Mexborough. These two routes are the natural business, transport and shopping routes and in this case Rawmarsh

remained apart from the outbreak in the rest of the division. In the Rawmarsh case a brother of the patient attended Mexborough Grammar School and there were cases in Swinton and Mexborough at that time but no evidence of direct contact with any of these cases. The patient made a complete recovery.

Measles.

There was an extensive outbreak of measles. The great majority of the cases were mild and some developed chest complications. With modern therapy measles is not the dangerous disease it used to be but it is still highly infectious and it is wise to have medical aid in all cases, not just for the first case in the family as some of our mothers seem to think.

Tuberculosis.

Number on Register at 31st December, 1955.

						Males	Females	Total
Pulmonary	..	..	..	..	..	37	33	70
Non-Pulmonary		..	..	..	..	11	8	19
Totals	..	..	..	..	..	48	41	89

Number Removed from Register during 1955.

						Pulmonary Males	Females	Non-pulmonary Males	Females	Total
Deaths	..	..	..			3	—	—	—	3
Others (cured, re-diagnosed, transfers out of area, etc.)						1	2	—	—	3
Totals	..					4	2	—	—	6

Number added to Register during 1955.

						Pulmonary Males	Females	Non-Pulmonary Males	Females	Total
New notifications	..					3	5	1	2	11
Others (cases restored to register, transfers, etc.)..						1	—	—	—	1
Totals	..					4	5	1	2	12

New Notifications—Pulmonary.

Age Groups							Males	Females
0— 5 years	..	..	..	..	..	..	—	1
5—15 years	..	..	..	..	..	..	—	—
15—25 years	..	..	..	..	..	..	—	—
25—35 years	..	..	..	..	..	..	1	—
35—45 years	..	..	..	..	..	..	1	3
Over 45 years	..	..	..	..	..	..	1	1
Totals	..	..	..	..	..	..	3	5

No. of Contacts given B.C.G. Vaccine = 4.

	1955	1954	1955
	Rawmarsh	Rawmarsh	Eng. and Wales
Tuberculosis Death Rate ..	0.10	0.16	0.15

Tuberculosis.

There were 8 fresh notifications of Pulmonary Tuberculosis cases. This infectious disease is different from others in that it is a chronic disease and the danger of spreading infection persists from time to time as long as the patient is alive. Children and young adolescents are the extremely susceptible age groups but the hard core of infection is in the older chronic case which may have had treatment from time to time. All our school children are examined for exposure to this disease on school entry, and when a case is notified the Chest Physician, Dr. Morrison, examines all close contacts.

Housing is made available by the district Council where present accommodation is not suitable. Material help for home isolation exists in the provision on loan of bedding, bed linen, beds, etc. Supplementary milk may be supplied to active cases, and the Home Help Service may assist. Many cases are treated at home by our Home Nurses and our Health Visitors see that the patient knows about the allowances and assistance that can be provided in such cases.

Section 47 of the National Assistance Act, 1948.

This provides for the removal to suitable premises of persons in need of care and attention—action was about to be taken in one case but the patient was admitted to a Mental Hospital.

Sewage Works.

Work commenced on a new trunk sewer to deal with the northerly part of the district beyond Monkwood and running down the valley to Warren Vale and the main sewage works. See also Sanitary Inspector's Report.

Water Supply.

The domestic supply is obtained from the Sheffield Water Authority and is of the highest purity. It is regularly sampled. See also Sanitary Inspector's Report.

Smoke Abatement.

Abnormal industrial pollution exists on the Parkgate district and as this has been so often the subject of discussion it might be wise to summarise what has taken place in the last few years :—

A standard deposit recording gauge was installed at Granby House in October, 1951, as it had become apparent that there was severe atmospheric pollution in this area and it was thought desirable that this should be measured scientifically.

The recording gauge is in the open 100 yards due North from two blast furnaces used for smelting iron, and whose combined production

is 3,000–4,000 tons of iron a week for a consumption of 3,000–4,500 tons of coke in the same period. Two main line railways to York and Leeds and a colliery are situated $\frac{1}{3}$ rd mile to the East, a chemical works and tar distillery $\frac{1}{2}$ mile to the South-west. Due North and $\frac{1}{2}$ a mile distant is another recording gauge at the Clinic, Barbers Avenue.

The two blast furnaces are the only blast furnaces in the Sheffield area which is not an Ironsmelting area. They are 75' high and are circular, hollow, water cooled, brick-lined retorts, into which loads of iron ore, limestone and coke are automatically fed at the top by mechanical skips which receive their charge from storage bunkers at the furnace base. These bunkers are filled by conveyor belts—the whole process is automatic. The skip travels up an inclined ramp to the top of the furnace 75' up. Here it turns over and discharges its contents to the furnace where it falls on a small bell closing the top of the furnace. The weight forces the bell open and the contents fall to another bell sealing the furnace proper. Below the second bell is the main furnace at the base of which liquid iron and slag are run off whilst refilling takes place at the top. The process is a continuous one week in week out until the brick lining of the furnace burns out years later. The furnace is then put out and relined. During the process a vast amount of gas is produced, this is tapped at the Blast Furnace, led away, cooled and cleansed by electrostatic precipitators. The gas cleansing plant can cleanse four million cubic feet of gas per hour. The dust taken out of this gas is washed down by water sprays and removed as a semi-solid sludge—10,000 gallons of this is removed every 24 hours and dumped. The clean gas is recirculated or consumed.

Co-operation with the steelworks staff has been carried out on a cordial basis—frequent conferences were held and copies of our monthly deposit figures are sent to the directors, who set up in addition their own recording plant.

Average Monthly Total Deposit Recorded in Tons per Square Mile.

					Granby House	Clinic, Barbers Ave.
1952	..	..	..	..	132	19
1953	..	..	..	..	117	18
1954	..	..	..	..	69	22
1955	..	..	..	..	59	20

It will be seen that there has been a 47% reduction in deposit in this period. The deposit was analysed in 1953 by the public analyst and a copy of the analysis is seen below compared with deposit at Doncaster and the Clinic, Barbers Avenue. This illustrates the peculiar nature of the deposit.

				Total Silica	Iron Oxide	Total Ash
Doncaster	..	..	..	0.72 gms.	.032 gms.	.196
Granby House	..	..	..	.600	1.340	2.157
Barbers Avenue	..	..	..	.103	.043	.180

Thus 90% of the deposit at Granby House is due to Blast Furnace slag, being a mixture of coke, iron ore and limestone. It is an exceedingly

heavy deposit and can be lifted by a magnet. It is not soot for which it is often mistaken and misquoted. An equivalent weight of soot would occupy enormous bulk compared with this heavy deposit. It comes in part from the conveyor belts (which are screened) the skip and the loading at the furnace top, but the main bulk comes from sudden increases in gas pressure within the furnace due to irregular settlement—these gases lift the two bells at the furnace top which act as safety valves and takes dry aggregate with them. By using foreign ore with a higher iron content and mixing this with native ore better settlement and more regular working of the furnaces has been obtained, cutting down these sudden pressure increases. In 1953 one furnace had an experimental dust arrester fixed at the top and in 1954 in the holiday period, No. 2 was similarly dealt with.

The combined efforts of the Company and the local District Council have secured a 47% reduction in the deposit and we are still trying to reduce it further. The interesting point is that owing to its very heavy nature the deposit is confined to the immediate vicinity of the blast furnace. During this four year period the deposit $\frac{1}{2}$ a mile away at Barbers Avenue has remained constant at 20 tons per square mile per month—an average figure for any industrial area, showing the fall out is maximum within 300–350 yards of the furnaces.

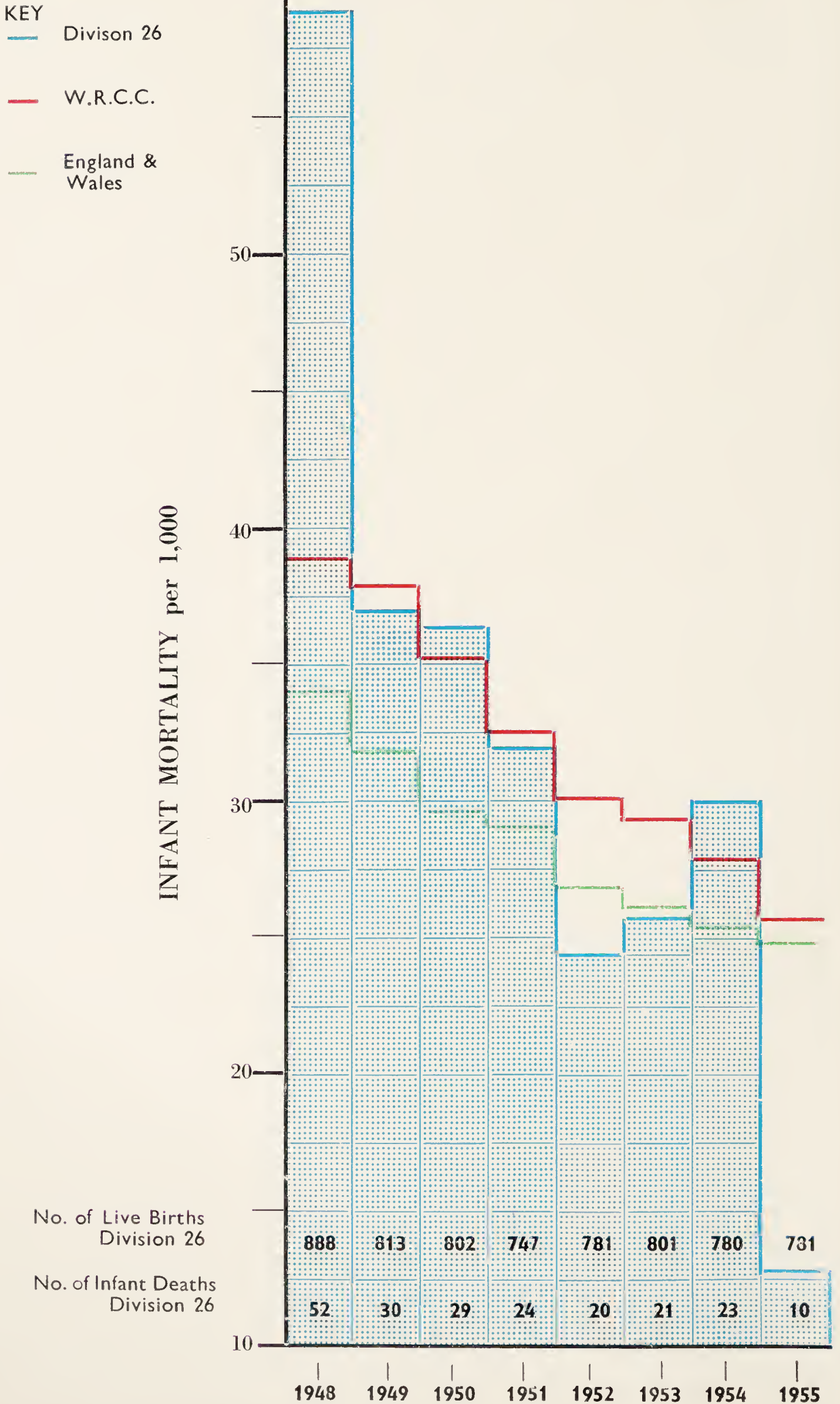
The deposit does not cause silicosis as the silicon is soluble. In February, 1955, 1,255 employees at the Steelworks were mass X-rayed. One case of pneumoconiosis was revealed. This compares with 39 cases of pneumoconiosis found in 926 miners at a nearby colliery. Quite possibly the case at the steelworks was in a miner, but as the results are confidential I do not know.

There are other causes of atmospheric pollution in the district and these are dealt with in the Sanitary Inspector's Report.

Housing.

158 permanent houses were erected for the Local Authority and 12 by private enterprise. There are no less than 436 houses unfit and not capable of repair at reasonable expense. They will eventually have to be demolished. Four houses were demolished.

Infant Mortality Rates per 1,000, 1948 to 1955



PERSONAL HEALTH SERVICES—DIVISION 26.

(Swinton, Rawmarsh and Wath upon Dearne Urban Districts).

Summary of Vital Statistics for 1954 and 1955 for Division 26.

	1955	1954
Area of Division	7,990	acres
Estimated Population	45,250	
Birth Rate (per 1,000 estimated population) ..	17.1	17.24
Death Rates (per 1,000 estimated population) :		
All Causes	10.6	10.65
Cancer	1.68	1.66
Heart and Circulatory	4.22	4.42
Infective and parasitic diseases, excluding T.B.	0.07	0.11
Respiratory Diseases	1.22	0.97
Respiratory Tuberculosis	0.07	0.11
Other Tuberculosis	Nil	Nil
All Tuberculosis	0.07	0.11
Maternal Mortality	1.25	Nil
Infant Mortality (Rate per 1,000 live births) ..	12.8	29.45

Comparative Table of Vital Statistics for Urban and Rural Districts in the West Riding and England and Wales for 1955.

	Live Birth Rate	Death Rate	Infective and Parasitic Dis's. excluding T.B. Death Rate	Respiratory Diseases Death Rate	Heart and Circulatory Diseases	Cancer	Tuberculosis Death Rate All Forms	Infant Mortality Rate	Maternal Mortality
Division 26 ..	17.1	10.6	0.07	1.22	4.22	1.68	0.07	12.8	1.25
U.D.'s in West Riding	14.8	12.5	0.06	1.28	4.71	2.03	0.13	25.2	0.45
R.D.'s in West Riding	16.6	9.6	0.07	1.03	3.55	1.54	0.10	28.6	1.19
Administrative County ..	15.3	11.7	0.07	1.21	4.39	1.90	0.12	26.2	0.67
England and Wales ..	15.0	11.7	*	*	*	2.06	0.15	24.9	0.64

* Figures not available.

All Figures per 1,000 population except last two columns.

As previously noted in the Swinton report there was one maternal death in the Division due to a complication arising after childbirth. The infant mortality rate is the lowest ever recorded in the division and in fact is the lowest of all the Health Divisions in the West Riding. Put simply this means that fewer children under the age of one year died in the division than in any previous year—the rate being half the national

rate. This is a remarkable happening and is some significant reward for the amount of care given to young mothers and children in post war times. It is all the more praiseworthy when we realise that it is associated with a higher than national birth rate and that the division is situated in an area of mining and heavy industry. Many may take the narrow view that the survival of an infant depends on having medical attention at the birth of the child and subsequently if the child is sick—nothing could be further from the truth. High rates of survival entail adequate housing with the elimination of slums and overcrowded conditions—both deadly enemies of little children ; good feeding with the emphasis on the quality of the food, not on quantity, and efficient ante-natal care of the mother from early in pregnancy with later regular supervision of the healthy infant. Grandmothers sometimes tell young mothers they had none of these things and managed very well. They tend to forget how many little children were lost in infancy.

The vital statistics for other causes of death compare favourably with both the County and National Statistics.

Home Nursing Service.

The staff consists of 7 full-time nurses and 3 part-time.

			No. of Cases Assisted			Visits
1955	..	..	1,056	..	..	30,617
1954	..	..	1,211	..	..	30,008
1953	..	..	1,034	..	..	25,348

Home Nurses may attend any person who is in need of nursing care at the request of the Family Doctor who is looking after the patient. The service includes the care of those suffering from acute illness, chronic illness, cases of tuberculosis treated at home and general care in case of the aged infirm.

Anything required for nursing the sick at home can be supplied either direct from Dunford House or from the County Pool of Nursing Equipment. All articles are supplied free, on loan, and are returned to store when no longer required. Hospital beds, fracture beds, rubber sheeting, dunlopillo mattresses, bed pans, back rests, walking aids, rest chairs for arthritic patients and wheel chairs for convalescents are supplied as required.

The difficulty in maintaining the service is due to lack of staff and the inevitable increase in work that this means for the staff remaining. This difficulty was most acute in Swinton where shortage of staff was aggravated by absences due to sickness. In spite of this the total number of visits made was in excess of the previous year. In the Autumn Nurse M. Linegar retired after many years' loyal service in the Swinton Area, leaving a permanent vacancy which was unfilled at the end of the year in spite of repeated advertisement.

Infant Welfare and Health Visiting Service.

Centre	Doctor in Charge	No. of individual children who attended during the year	Total No. of attendances made by children in previous column during the year	
			Under 1 yr. of age	Over 1 yr. of age
Wath	Dr. M. Lister	377	1574	469
West Melton ..	Dr. M. Lister	198	1151	288
Swinton	Dr. I Campbell	288	2453	738
Kilnhurst	Dr. J. Core ..	93	777	345
Rawmarsh	Dr. J. Core	340	1314	328
Parkgate	Dr. M. R. Menzies	91	466	120
Totals		1387	7735	2288

No. of Home Visits made by Health Visitors within the Division during the year :

	First Visits	Total Visits
Expectant Mothers	80	231
Children under 1 year	732	4671
Children between 1 and 5	*	8458
Other cases	*	6073
Totals	812	19433

* Figures not available.

Nine Health Visitors are employed in the Division. All have the combined qualification of Nurse and Midwife and in addition have attended a years training at college before qualifying as a Health Visitor. They are also employed as School Nurses so that one person fills the dual role.

The present role of the Health Visitor includes responsibility for advising the whole family in Health matters. Their work is no longer confined to the care of mothers and children only. The Health Visitor must work in close contact with the Family Doctor, and every effort has been made to increase co-operation where this has been found to be unsatisfactory.

The Health Visitors attend all the Infant Welfare Centres and advise the mothers on the infants diet, clothing, exercise, etc. They follow the progress of all premature babies until a satisfactory standard of physical development has been attained as the premature infant is more prone to ill health in the first few weeks of life. They visit the homes of the mothers when the mothers are unable to attend the Centres. They advise on immunisation procedure and vaccination against smallpox and arrange for this to be performed by the Doctors at the Infant Welfare Centre or by the Family Doctor.

From time to time they are asked to prepare reports on the progress of children by the Child Health Specialist or by Hospital Physicians or Surgeons who have had sick children under their care. They visit all

homes including those of substandard families and can often be of assistance in obtaining improvement in the physical care of the children in such families, who may suffer neglect due to the indifference of their parents to the daily needs of young children.

The Health Visitor also supervises the Home Help Service and visits when possible all the aged people in her district who may be living alone and in need of a little friendly assistance from time to time. They assist the aged in obtaining assistance from many official sources, e.g., the National Assistance Board, the Welfare Officer, Nursing Association (in Swinton) or from the Aged Peoples Welfare Committees in the whole of the Division. As Nurses they attend all the special clinics including Eye Clinics, Ear, Nose and Throat, Orthopaedic, Ante-Natal and the special Clinics organised by the School Medical Service to follow up the health of those children who are handicapped or suffering from ill health. Two of the Health Visitors attend at Wath Wood Tuberculosis Hospital and the Chest Clinic Out Patients at Mexborough to maintain contact between patients, the Medical Officer of Health and the Chest Physician and to assist the patients in any matters of domestic difficulty brought about by their illness. They also report to the Divisional Medical Officer any children under school age who may be in need of special educational treatment due to blindness, deafness, mental backwardness or physical disability. In some of these conditions it is essential that education should begin at a very early age ; hence the need for early reporting.

Hospital medical staff require knowledge from time to time about the home circumstances of a patient particularly when about to discharge a handicapped person or an aged and infirm patient. The Health Visitor is responsible for supplying such reports to the Divisional Medical Officer.

Maternity Services.

BIRTHS.

				Domiciliary	Institutional	Proportion of Domiciliary to Institutional
Wath ..	..	..	..	153	103	8 : 5
Swinton	..	..	..	117	78	3 : 2
Rawmarsh	..	..	..	191	159	5 : 4

ANTE-NATAL CLINICS.

Clinic	Doctor in Charge	No. of women who attended	No. of women who attended for blood exam. only	Total No. of attendances made by women
Wath ..	Dr. D. Chapman	67	60	493
Swinton	Dr. H. H. Smith	139	—	651
Rawmarsh	Dr. M. Scott	227	—	882
Totals ..		433	60	2026

POST NATAL CLINICS.

(Held jointly with Ante-Natal Clinics).

Clinic	Doctor in Charge	Number of women who attended	Total No. of attendances made by women
Wath	Dr. D. Chapman	21	22
Swinton	Dr. H. H. Smith	36	38
Rawmarsh	Dr. M. Scott	30	32
Totals		87	92

RELAXATION CLASSES.

Clinic	Officer in Charge	Number of women who attended	Total No. of attendances made by women
Swinton	Midwife F. Launders	43	260
Wath	Midwife M. Barber	108	1007
*Rawmarsh	Midwife L. Bamford	6	25

* Commenced 27/10/55.

There was one maternal death in the Division, the first for three years. This was due to a condition associated with the puerperium.

The staff of the Midwifery service consists of 9 Midwives and 1 relief. 461 mothers were confined at home or 59% of all confinements in the division. In 422 cases the Midwife in attendance delivered the patient without the assistance of the Family Doctor. Ante-Natal Clinics are held at Wath upon Dearne, Swinton and Rawmarsh and Family Doctors are notified of the attendance of mothers at these Clinics and of any abnormalities that ensue. Complete blood investigation is carried out at the clinics, as failure to do this may mean subsequent delay of a blood transfusion if necessary for the mother or baby and although this is seldom required, when it is required it is usually a matter of some urgency. Similarly mothers with certain types of blood may lose their babies unnecessarily if the blood has not been checked for Rhesus antibodies.

It is in the interest of the mother and her unborn child to book a Family Doctor and a Midwife early in pregnancy. There is a tendency to book later in pregnancy, and some times in advanced pregnancy. This can only have the effect of lowering the standard of Ante-Natal care and eventually will have unhappy consequences for the mother and child in some cases. If Ante-Natal care is to be of value in safeguarding the health of the mother and child it must be commenced early in pregnancy and be continued until term.

Where mothers do not attend an Ante-Natal Clinic and are to be delivered at home it is the duty of the midwife to visit them in their homes. It is essential that the Midwife and mother get to know each

other well ; the Midwife must keep in direct contact with the Family Doctor. When Mothers are admitted to hospital in labour or in advanced pregnancy it is wise for the Midwife to accompany the case to hospital and this is arranged when it is possible.

All mothers are trained in the use of Gas and Air and Pethidine—substances used for analgesia in childbirth. The Midwives regularly attend Refresher Courses at major centres of midwifery so that they are kept up to date—two of the Midwives attended such courses during the year.

The success of the relaxation classes held at Swinton and Wath and commencing in Rawmarsh has been encouraging. The instruction is primarily intended for mothers expecting their first baby and they are advised about the process of childbirth and taught how to assist this during delivery. The Midwives instructing have been trained for this work. These classes are conducted for all mothers whether they attend Ante-Natal Clinics or not and include the care of the new born child and the mother's diet in pregnancy, both vital factors for healthy babies and mothers.

PREMATURE BIRTHS.

District	Born Alive			Still-born			No. Rem. to Hosp. after Birth	No. who survived 28 days		
	At Home	In Hosp.	Total	At Home	In Hosp.	Total		At Home	In Hosp.	Total
Wath	12	6	18	2	3	5	1	11	6	17
Swinton ..	5	5	10	—	3	3	1	5	4	9
Rawmarsh ..	7	19	26	2	4	6	1	6	15	21
Totals ..	24	30	54	4	10	14	3	22	25	47

There were 54 premature births of which 47 were surviving at the end of one month. Thus out of the 10 infant deaths in the whole division 7 were due to prematurity or its associated defects. Prematurity is the main cause of infant mortality and can only be prevented by adequate Ante-Natal care and by good nutrition of the mother and good living conditions. In some cases of prematurity the cause is imperfectly understood but in mothers in the Registrar General's higher social groups it is very rare.

Care of the Unmarried Mother and her Child.

There were 27 illegitimate births in the division. 24 of these came to our notice. In 22 cases the mother kept the baby—this is the best solution if it is possible to do so. In 1 case the infant was adopted. Special care is devoted to this section of the community as they tend to avoid ante-natal supervision and they require sympathetic assistance. Miss Spooner, a Voluntary Welfare Worker of the Church of England, assists these cases irrespective of religion and advice and accommodation is arranged for the confinement by the Health Committee of the County Council.

Welfare Foods.

The foods concerned are National Dried Milk, Cod Liver Oil, Orange Juice and Vitamin A and D Tablets. These are sold at Dunford House and Infant Welfare Centres throughout the Health Division by clerical staff and not by Nurses who are more suitably employed in dealing with any questions the mother may have concerning infant welfare.

Domestic Help Service.

Establishment of Domestic Helps 24 Full time
 No. of Domestic Helps employed 62 Part time
 Cases provided with Domestic Help during the year
 ended 31st December, 1955 :

					No. of Cases	Hours
1.	Maternity (including expectant mothers)	..			73	6009
2.	Tuberculosis .. .. .	..	..	..	2	266
3.	Chronic sick (a) Aged 65+	..	..	..	284	45795
	(b) Under 65 .. .. .	..	..	..	6	3570
4.	Others .. .. .	..	..	..	13	1494
	Totals .. .. .	..	..	..	378	57134
				1953	1954	1955
	Average No. of staff (part-time) ..			47	52	62
	Total Hours			39,399	48,790	57,134

Domestic Helps are required where assistance is necessary in running the home owing to illness or old age or a home confinement ; or some other circumstances. The demand increases yearly. The service is not free and every case is assessed by the Divisional Welfare Officer. In point of fact Most Old Age Pensioners do not contribute to the cost of the Service. The establishment of home helps is a definite one and the amount of assistance given to any one case depends on the total demands on the service. If someone needs more assistance someone else has to suffer a reduction. The service is supervised by the Health Visitors and is a most valuable service as it reduces the demand for County Home Accommodation for the aged and in association with the Home Nursing service reduces the demand for hospital beds for the chronic sick.

MENTAL HEALTH SERVICE.

Mentally Defective Persons.

					Division No. 26
1.	(a) Total No. .. .. .	..	..	..	121
	(b) No. ascertained during 1954 .. .. .	..	..	..	4
2.	(a) No. under Guardianship .. .. .	..	..	..	2
	(b) No. under Statutory Supervision .. .. .	..	..	..	99
	(c) No. under Voluntary Supervision or Observation				15
	(d) No. on licence from Institutions .. .. .	..	..	..	2
3.	(a) No. awaiting Institution admission .. .. .	..	..	..	7
	(b) No. attending Group Training Classes .. .. .	..	..	..	19
	(c) No. receiving Home Training .. .. .	..	..	..	11
	(d) No. in Remunerative Employment .. .. .	..	..	..	40

There is an increasing tendency for those suffering from mental ill-health to be admitted in a voluntary fashion to mental hospital for treatment. On discharge if after care and assistance is necessary this can be supplied by the Social Worker, Miss Ball, who visits the patients in their homes. Miss Ball also supervises those Mental Defectives on licence from institutions and assists them in obtaining employment. The demands on the services of the Social Worker are becoming increasingly heavy.

For the Mental Defectives who are capable of benefiting by simple training, Group Training Classes are held at Centres in each of the Urban Districts. At present these Centres are held in the existing premises at Dunford House, Rock House and Barbers Avenue and whilst these premises are not designed for this purpose it is the best we can do in the circumstances. Plans are in being for the construction of an Occupation Centre at Wath upon Dearne but these have had to be held in abeyance due to active mining subsidence. Mrs. O'Leary resigned as an assistant Home Teacher at the end of the year. Mrs. L. Feasey, a fully qualified Mental Health Home Teacher, continued in charge of the group training. The children and adults attending continue to improve in social behaviour and some are becoming quite skilled in simple crafts. The position regarding admission of urgent cases to suitable institutions is greatly improved compared with previous reports but this improvement can only be maintained if more accommodation is made available and more candidates come forward for training as Mental Health Nurses.

CHILDREN LIKELY TO BE NEGLECTED OR ILL-TREATED IN THEIR OWN HOMES.

From time to time Health Visitors, Children's Officers and School Welfare Officers and other members of the Public report cases where investigation is called for in order to prevent child neglect. A number of such cases are kept under constant review. Liaison is maintained with the N.S.P.C.C. and all others interested in the welfare of children. The Divisional Medical Officer is the officer appointed for the co-ordination of this service. It was not found necessary to take any Court action in the division in 1955. The great majority of children are well cared for with the result that the neglected child appears unduly prominent.

DIPHTHERIA IMMUNISATION.

The Immunisation rate in school children is excellent and well above the ministry minimum of 75%. Consent is seldom refused in the case of school children. In the pre-school group of children the immunisation rate is poor and if there is an outbreak of Diphtheria in the area it is the pre-school children who will give us cause for concern. The highest mortality in the disease is usually in infancy ; all the more reason why the child should receive protection early.

SMALLPOX VACCINATION.

Number of Persons Vaccinated or Re-vaccinated during 1955.

Age at 31.12.55 <i>i.e.</i> , born in years	Under 1 1955	1—4 1951/54	5—14 1941/50	15 or over before 1941	Total
No. vaccinated :					
Wath	46	14	—	2	62
Swinton	24	1	2	5	32
Rawmarsh.. ..	77	5	1	2	85
No. re-vaccinated :					
Wath	—	—	—	—	—
Swinton	—	—	—	16	16
Rawmarsh.. ..	—	—	—	1	1

Protection by vaccination remains the only safeguard against this virus disease which as a rule has a mortality in the region of 30%. Owing to the rapid increase in the rate of travel it is likely that Smallpox will be introduced to the country from time to time. The best time to be vaccinated is in infancy when the complication rate is negligible. Subsequent re-vaccination in later life will then produce minimum disturbance and reaction.

There was an increase in the number of infants vaccinated in each of the three districts.

WHOOPING COUGH IMMUNISATION.

This is offered at all infant welfare centres to children under 4 years of age. Children should be protected in infancy at the third to the six month of age. The vaccine protects against severe attacks of the disease and in 75-80% prevents the disease from developing at all. This disease now causes more deaths and disability in infancy than any other infectious disease.

SCHOOL HEALTH SERVICE.

There are 8,700 scholars on the school registers in the division. All are medically examined on entry to school, and since July, 1955, the 7-8 year group and on entry and leaving Secondary Schools. In cases where further examination is necessary this is arranged by appointment. Family Doctors are consulted before any scholar is referred to a Consultant School Clinic and are similarly notified of all Consultants' Reports.

Dr. C. Harvey, Paediatrician to the County Council, conducts regular Clinics at Barbers Avenue and the local Hospitals so that continuous specialist supervision is possible when required.

Dr. M. R. Menzies in addition to her work in the School Health Service is responsible for the ascertainment of the various categories of handicapped pupils and an increasing amount of time has to be spent on this every year.

DIPHTHERIA IMMUNISATION.

Urban District	No. of Children Immunised in 1955			No. of Children given booster doses during 1955			No. of Children Immunised at any time up to 31/12/55			Estimated Mid-Year Population			Percentage	
	Under 5 Yrs.	5—14 Yrs.	Total				Under 5 Yrs.	5—14 Yrs.	Total	Under 5 Yrs.	5—14 Yrs.	Total	Under 5 Yrs.	5—14 Yrs.
Wath	130	25	155	232			534	1958	2492	1175	2277	3452	45.4	86.0
Swinton	110	39	149	20			524	1751	2275	943	1892	2835	55.6	92.5
Rawmarsh	174	120	294	550			610	2841	3451	1601	3033	4634	38.1	93.7

School Clinics.

Ultra Violet Light	..	..	..	..	Wath and Rawmarsh.
Ophthalmic Clinics	..	..	..	..	Wath and Rawmarsh.
Child Guidance Clinic		..	..	..	Rawmarsh.
Paediatric Clinic	..	..	..	..	Rawmarsh.
Orthopaedic Clinic	..	..	..	..	Rawmarsh.
E.N.T. Clinic	..	..	..	..	Montagu Hospital.

Inspections of School Children, 1955.

Entrants	..	..	..	..	..	..	..	938
7-8 year group	..	..	..	..	..	..	..	532
Last year primary	..	..	..	..	..	..	..	478
1st year secondary	..	..	..	..	..	..	..	1
Last year secondary		..	..	..	..	..	..	684
Other periodic	..	..	..	..	..	..	..	2
								2635
No. of Special Inspections	..	..	..	..	..	..	..	2654
No. of Re-inspections	..	..	..	..	..	..	..	886
								3540
Grand Total of Inspections carried out	..	..	..	..	..	..	..	6175

Cleanliness of School Children and Head Infestation.

		Total Children Infested	School Population	Percentage Infested
Rawmarsh and Parkgate	..	332	3466	9.6
Swinton and Kilnhurst	..	41	1563	2.6
Wath and West Melton	..	89	2770	3.2

Comparative Figures.

			1954	1955	W.R.C.C. 1955
Total No. infested	..	..	568	462	—
Total Children	..	..	7603	7799	—
Total Percentage			7.5	5.9	4.5

Detailed Breakdown in Figures.

District			GIRLS			BOYS		
			No. Infested	Popula- tion	Percent- age	No. Infested	Popula- tion	Percent- age
Rawmarsh	..	..	233	1664	14.0	99	1802	5.5
Swinton	..	..	34	767	4.4	7	796	0.9
Wath	..	..	77	1338	5.8	12	1432	0.8
Division	..	..	344	3769	9.1	118	4030	2.9

The School Population is an average population for the year and excludes the Grammar School. There was an improvement in cleanliness throughout the whole Division in the course of the year.

Care of Handicapped Children.

Day School for E.S.N. Pupils	..	..	..	..	..	5
Residential School for E.S.N. Pupils	..	..	..	..	..	4
Hostel for Maladjusted Boys	..	..	..	..	..	—
Residential School for Deaf or Partially Deaf Pupils	..	..	..	..	..	6
Residential School for Deaf E.S.N. Pupils	..	..	..	..	..	1
Residential School for Partially-sighted pupils	..	..	..	..	..	2
Residential School for Blind Pupils	..	..	..	..	..	—
Residential School for Delicate Pupils	..	..	..	..	..	1
Residential School for Spastic Pupils	..	..	..	..	..	4
Orthopaedic Hospital School	..	..	..	..	..	—
						—
						23
						—
No. of children receiving Home Education	..	..	..	..	..	3
Total No. of children receiving Education other than at an ordinary school	..	..	..	..	..	26

TUBERCULIN JELLY TESTING OF SCHOOL ENTRANTS.

All School Entrants, whose parents have given written consent, have been jelly tested. The results are as follows :—

No. Tested		No. Positive		No. Negative	
Males	Females	Males	Females	Males	Females
427	425	7	11	420	414

All positives have been notified to their respective Family Doctors and have been referred to the Chest Physician at the local Chest Clinic, with the exception of one case, resident in a neighbouring Division, who was referred to the School Medical Officer in that area.

None of the cases was found to be suffering from active Tuberculosis.

Details of Medical Examinations Carried Out for Various Authorities.

College Entrants examined	..	..	..	..	..	39
Teachers examined	..	..	..	..	..	6
Superannuation Examinations for (County)	..	..	..	..	..	11
Superannuation Examinations for (Local Councils)	..	..	..	..	..	1

RAWMARSH URBAN DISTRICT COUNCIL

Annual Report of the Sanitary Inspector for the year 1955

*To the Chairman and Members of the
Rawmarsh Urban District Council.*

Mr. Chairman, Madam and Gentlemen,

It is with pleasure that I submit my fifth annual report on the work of your sanitary inspectors during 1955.

On the formation of a separate Housing Department on the 1st April the Department was relieved of housing allocation and management duties. This enabled more time to be devoted to public health work.

The excellent building progress made by the Council during the year raised hopes of an early resumption of slum clearance. The work of re-conditioning those sub-standard houses which can be made fit at reasonable expense should be complementary to the clearance of totally unfit houses. Owners have so far shown little interest in improvement grants so it may become expedient to resort to Housing Act procedure to provide houses with reasonable amenities. Alternatively the Council may feel that they could best deal with this aspect of housing by acquisition of suitable properties.

The number of cases of overcrowding declined to 16 which is a low figure for a District of this size. Unfortunately the legal standard for assessing overcrowding is also low and the introduction of a more satisfactory standard based on bedroom accommodation only is long overdue.

Once again delays in the refuse collection service occurred owing to shortage of labour and abnormal sickness coinciding with bad weather early in the year. Fortunately there is a nucleus of older workmen who remain in the Council's employment and the collection was restored to a reasonable frequency in the Spring.

Meat inspection required the services of one inspector several times each week throughout the year. Food and water sampling took place regularly and the results were, on the whole, satisfactory. More time will have to be devoted to the inspection of food premises in 1956 to implement the new Food Hygiene Regulations.

My work was made easier by the close interest and support of the Chairman, Vice-Chairman and Members of the Public Health Committee and the encouragement and advice of the Clerk of the Council and Medical Officer of Health. The additional sanitary inspector, Mr. James, and the staff did all that was expected of them during the year. Mr. James resigned at the year end after 25 years' service with the Council ; he was a sound and conscientious Officer and his work gave every satisfaction. Finally, the efforts of the workmen to maintain a reasonable service often in adverse weather conditions were not overlooked.

I am, Madam and Gentlemen,

Your obedient servant,

G. RAWLINSON, *Chief Sanitary Inspector.*

General.

Number of Sanitary Inspections, Visits, etc.	..	..	..	2359
Inspections re alleged nuisances	..	..	..	722
Number of nuisances in hand at the end of 1954	..	..	..	51
Number of nuisances found in 1955	..	..	..	825
Total number of nuisances needing abatement	..	..	..	876
Number of nuisances abated	..	..	..	819
Number of nuisances outstanding at end of 1955	..	..	..	57
Number of Informal Notices served	..	..	..	825
Number of Informal Notices complied with	..	..	..	819
Number of Statutory Notices served	..	..	..	16
Number of Statutory Notices complied with	..	..	..	14
Number of summonses or other legal proceedings	..	..	..	0

Complaints and Alleged Nuisances.

During the year 1,079 complaints were received and all were investigated, involving 3,081 visits. As in previous years most of the complaints concerned housing defects in privately owned property ; many of these complaints are received by the Inspectors whilst visiting in the District. Many of the older houses require constant repair and some owners appear to remedy defects only when action is taken by the Department. Delay in executing repairs is often met with due to the heavy demands on the services of property repairers. Some rent collectors tiring of receiving repeated complaints from tenants advise them to see the Sanitary Inspector.

Work required by notices served under Sections 44 and 45 of the Public Health Act, 1936, was executed by the Council in default of the owners at eight houses.

Works Executed.

The following works were executed as the result of action taken by the Department :—

Roofs repaired and made watertight	..	..	..	..	176
Rainwater spouting repaired and made watertight	..	..	..	..	165
Chimney stacks repaired or rebuilt	..	..	..	..	30
House walls rebuilt, repaired, pointed	..	..	..	..	8
Windows replaced, repaired or re-corded	..	..	..	..	42
Doors replaced or made weatherproof	..	..	..	..	34
Food stores improved	..	..	..	..	3
Ceilings repaired or reconstructed	..	..	..	..	36
Walls replastered and/or water-proofed	..	..	..	..	65
Floors repaired or reformed	..	..	..	..	22
Staircase repaired/handrails secured	..	..	..	..	3
Kitchen ranges repaired or replaced	..	..	..	..	45
Fireplaces repaired or replaced	..	..	..	..	11
Hearths reformed	..	..	..	..	2
Flues repaired or obstructions cleared	..	..	..	..	14
Set-pot wash boilers repaired	..	..	..	..	2
Steps re-formed and made secure	..	..	..	..	2

Yard paving repaired or reformed	35
Coal-stores repaired or rebuilt	1
Yard walls repaired/rebuilt	6
Water pipes repaired	78
Water taps replaced/repairs	3
Sufficient water supply restored	47
Insanitary sinks replaced	12
Sink waste pipes repaired/replaced	16
Gullies replaced	3
Choked drains and gullies cleansed	103
Cellar coal-chutes repaired	5
Drains re-laid and made watertight	20
Inspection chambers repaired	4
Inspection chamber covers renewed	7
Vent/soil pipes repaired/replaced	1
Additional W.C's provided	6
W.C. structures repaired/rebuilt	36
W.C. pedestal fittings replaced	30
Obsolete W.C. fittings replaced by pedestals	1
W.C's abolished	2
W.C. connections and fittings repaired	15
Water closet seats renewed	13
W.C. flushing cisterns or flush pipes repaired/replaced	54
Dustbins provided or replaced	236
Offensive accumulations/deposits removed	8
Houses cleansed or disinfested	1
Miscellaneous nuisances abated	5
Animals improperly kept	3
Defective air bricks renewed	1

Housing Statistics.

Number of dwelling houses in the District	6049
Number of back-to-back houses included in above	0

1. Inspection of dwelling houses during the year.

(1) (a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	702
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(b) Number of inspections made for the purpose	2359
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(2) (a) Number of dwelling houses (included under sub-head (1) above), which were inspected and recorded under the Housing Consolidated Regulations	9
---	---

(b) Number of inspections made for the purpose	45
--	----

(3) Number of dwelling houses needing further action :—

(a) Number considered to be in a state so dangerous or injurious to health as to be unfit for human habitation	436
--	-----

(This figure represents houses scheduled for slum clearance procedure).

(b) Number (excluding those in sub-head (3) (a) above), found not to be in all respects reasonably fit for human habitation		652
2. Remedy of defects during the year without service of formal notices.		
(a) Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers		326
(b) Number of defective dwelling houses (excluding those shown in (a) above) in which defects were remedied as a result of informal action		295
3. Action under Statutory Powers during the year.		
A. Proceedings under Sections 9, 10 and 16, Housing Act, 1936 :—		
(1) Number of dwelling houses in respect of which formal notices were served requiring repairs ..		—
(2) Number of dwelling houses which were rendered fit after service of formal notices :—		
(a) By Owners		—
(b) By Local Authority in default of owners ..		—
B. Proceedings under Public Health Acts.		
(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied		702
(2) Number of dwelling houses in which defects were remedied after service of formal notices :—		
(a) By Owners		32
(b) By Local Authority in default of owners ..		8
C. Proceedings under Sections 11 and 13 of the Housing Act, 1936.		
(1) Number of representations, etc., made in respect of dwelling houses unfit for habitation		9
(2) Number of dwelling houses in respect of which Demolition Orders were made		6
(3) Number of dwelling houses demolished in pursuance of Demolition Orders		4
(4) Any action under Sections 10 and 11 of the Local Government (Miscellaneous Provision) Act, 1953? If so what?		None
D. Proceedings under Section 12 of the Housing Act, 1936.		
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made ..		None
(2) Number of separate tenements or underground rooms, the Closing Orders in respect of which were determined, the tenement or room having been rendered fit		None

273 houses individually and with 163 by Clearance Area procedure. These figures were submitted to and approved by the Ministry of Housing and Local Government as the Council's five year programme. A Sub-Committee was formed to make recommendations on the phasing of the slum-clearance programme.

Housing—Overcrowding.

A check was made on potential overcrowding cases and as a result it was found that 16 houses were overcrowded by the Housing Act, 1936, standard. This is a low figure for a district of this size. 15 cases of overcrowding were abated during the year.

Housing—Improvement Grants.

Preliminary applications were received from owners for improvement grants for 38 houses of which 29 were let, the remainder being owner-occupied. 38 applications were agreed in principle and 5 formal applications were approved. Improvements were completed at 4 houses. An application for a conversion grant for making a large house into two flats was not approved. The improvement grants scheme introduced in the Housing Act, 1949, has failed to achieve the object of providing appreciable numbers of structurally sound houses with modern amenities.

Despite national publicity and the Council's own efforts to interest the principle owners and agents of rented houses in the District the only interest now shown is an odd enquiry from an owner-occupier. In many cases applications have been agreed in principle but later the owner decides not to proceed with the scheme. This work involved 70 visits and inspections.

Housing—Certificates of Disrepair.

Under the Housing Repairs and Rents Act, 1954, 7 applications for Certificates of Disrepair were received and 7 were issued. Owners made application for 6 Certificates to be revoked and 6 Certificates of Revocation were issued.

Few owners have taken the opportunity to restore their houses to a good state of repair in return for increased rent. Twenty-one visits were made for this purpose.

Temporary and Moveable Dwellings.

One of the two sites licenced for a total of 6 moveable dwellings was cleared by the end of the year and one temporary bungalow remained on the second site.

Five individual licences for caravans were issued during the year but two of these lapsed when the caravans were moved from the District.

Two unlicenced caravans were removed from the District following warnings by the Department.

More progress was made in clearing hutments from Red Ash Hill Estate, Parkgate, seven huts being closed or demolished in 1955. At the end of the year 21 hutments remained in occupation. The Council propose to deal with these in their slum clearance programme.

Water Supply.

Sixteen samples were taken from domestic supply taps in representative parts of the district for bacteriological examination at the Public Health Laboratory ; fourteen of the samples were satisfactory and two were unsatisfactory. The unsatisfactory samples came from the same tap and were due to the condition of the tap washer ; samples from adjoining houses were satisfactory.

The remaining part of the new 15" water main was sterilised under supervision of the Department and afterwards the main was put into use.

Complaints continue to be received of an insufficiency of supply to taps and water-closets, particularly where blocks of houses are fed by a common service pipe. As a result of action taken by the Department the supply was improved at 47 houses.

There are five houses in the District without a piped water supply and all are scheduled for slum-clearance.

Public Swimming Bath.

Four samples were taken from the public baths for bacteriological examination and in each case the result was satisfactory. The water is in continuous circulation and filtered and chlorinated before returning to the bath. Routine daily checks are made by the Manager to ensure adequate chlorination.

Sanitary Accommodation.

Number of Water-closets	..	..	..	..	..	..	7013
Number of additional W.C's provided at existing property in 1955							25
Number of W.C's provided at new houses and other premises in 1955	..	..	..	..	..	..	170
Number of W.C's demolished in 1955	..	..	..	..			5
Number of Pail closets	..	..	..	..	..	..	12
Number of Privies with open middens	..	..	..	..			32
Number of Privies with covered middens	..	..	..	..			14
Number of Privies converted to W.C's in 1955	..	..	..	..			0
Percentage of W.C's	..	..	..	..	..	..	99.18

No further progress was made with the proposed conversion scheme for the houses at Chapel Walk, Upper Haugh. This scheme is linked up with the new trunk sewer scheme for the Northerly part of the district, work on which was well under way at the year end.

The Council agreed to consider a conversion grant for cottages at Low Stubbin and the owners were asked to submit their proposals.

A start was made on a new drainage scheme at New Stubbin Colliery which on completion will eliminate 12 pail closets.

Every opportunity will be taken to secure the conversion of the remaining privy-middens ; these abominations are out of place in 1956 in an Urban District.

Verminous or Filthy Houses.

One informal cleansing notice was served and two houses were disinfested for bed bugs.

Rodent Control.

During the year the sewers were test baited to ascertain the extent of rat infestation. Later poisoning treatment of infested sections of the sewers was carried out.

Fifty-five complaints of rat infestation and forty-three of mice were received. All were investigated and appropriate treatments applied. No charge is made for treating domestic premises and other premises are treated on re-payment.

The refuse-tip, sewage disposal works and other Council properties were treated regularly to control rats.

Warfarin poison is used whenever possible for both rat and mice infestations ; in other cases zinc phosphide is the agent used.

501 visits were made in connection with rodent control.

Infectious Diseases.

Investigations were made into cases of infectious disease and reports made to the Medical Officer of Health.

Home disinfection was carried out only in cases of pulmonary tuberculosis. Library books which had been in homes where infectious disease occurred were fumigated before being returned into circulation.

Atmospheric Pollution.

The Council are one of the constituent members of the Sheffield and District Smoke Abatement Committee whose officers dealt with complaints and routine smoke abatement work.

The atmosphere in Parkgate continues to be subject to heavy pollution from iron and steelworks both inside and outside the District and from a chemical works in an adjoining district. The Granby House deposit gauge registered an average monthly deposit of 57.36 tons per square mile and although this was a reduction of 12 tons on the 1954 figure, it is an extremely heavy deposit and gives no cause for complacency.

Frequent excessive smoke emission from two local collieries resulted in abatement notices being served ; promised electrification schemes were proceeding at the year end.

A third deposit gauge and lead peroxide apparatus were installed at Rosehill Park in July and the figures given are the average for the six months the apparatus was in use.

Dust emission from two tar-slag plants was again the cause of complaints. Action taken at one plant did restrict the dust nuisance and during the year proposals were approved for the installation of more modern equipment which should operate without causing nuisance.

The most significant event of 1954 concerning atmospheric pollution was the Beaver Report which was the basis of the Clean Air Bill under Parliamentary consideration at the year end. This Bill proposes to give Local Authority greater powers than hitherto to control air pollution.

The 1955 average monthly figures from the four sets of pollution measurement apparatus were :—

	Rawmarsh Rosehill Park	Rawmarsh Barbers Crescent	Parkgate Aldwarke Road	Parkgate Council Offices
Deposit Gauge, tons per square mile	15.28	20.15	57.36	—
Lead Peroxide Apparatus —SO ₃ mg/1000 sq. cms./Day	1.50	2.07	3.89	—
Smoke Filter—mg/100 Cubic Metres Daily Average	—	—	—	33.57

Watercourses.

Serious pollution of a watercourse caused by a Colliery was detected and reported to the Rivers Board.

Factories.

1. Inspections under the Factories Act, 1937, for purposes of provisions as to Health.

	No. on Register	No. of Inspections	Written Notices
(1) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authority	4	2	—
(2) Factories not included in (1) in which Section 7 is enforced by Local Authority	52	97	1
(3) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	5	—	—
	—	—	—
	61	99	1
	—	—	—

2. Cases in which defects were found :—

	No. of Cases	Remedied	Referred by H.M. Inspector
Want of cleanliness (S.1)	—	—	—
Overcrowding (S.2)	—	—	—
Unreasonable temperature (S.3) ..	—	—	—
Inadequate ventilation (S.4)	—	—	—
Ineffective drainage of floors (S.6) ..	—	—	—
Sanitary Conveniences (S.7) :			
(a) Insufficient	—	—	—
(b) Unsuitable or defective ..	1	1	—
(c) Not separate for sexes ..	—	—	—
Other offences against the Act (not including offences relating to Out- work)	—	—	—
	1	1	—

Shops.

Twenty-one inspections were made under the Shops Act, 1955. Most of the provisions of the Act, including closing hours and assistants hours are administered by the County Council.

Meat and Other Food Inspection.

The licenses of the three private slaughter-houses were renewed for a twelve months period. Regular slaughtering took place at two of these premises and intermittent slaughtering at the third. 100% meat inspection was maintained. 281 visits were made to slaughterhouses.

Details of meat inspection :

	Cattle ex- cluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed ..	.. 212	64	3	349	3974	0
Number inspected ..	.. 212	64	3	349	3974	0

**All diseases except
Tuberculosis and
Cysticerci :**

Whole carcasses con- demned	—	—	—	—	1	0
Carcases of which some part or organ was con- demned	35	10	—	51	343	0
Percentage of the number inspected affected with disease other than tuberculosis and cysti- cerci .. ..	.. 16.50	15.625	—	14.61	8.65	0

Tuberculosis only :

Whole carcasses condemned	1	2	—	—	—	0
Carcases of which some part or organ was condemned	16	21	—	—	255	—
Percentage of the number inspected affected with tuberculosis	8.01	35.937	0	0	6.417	0
Cysticercosis	No Cases Detected					

Under the Slaughter of Animals Acts three slaughtermen's licences were issued and ten were renewed, all for three year periods.

The following foodstuffs were inspected at shops and were found to be unfit, certificates being issued to shop-keepers :—

								lbs.
229 Tins of various foodstuffs .. .. .	..	..	..	..	..	..	..	285 $\frac{3}{4}$
Cheese .. .. .	..	..	..	..	..	..	..	119
Corned Beef and Luncheon Meat .. .. .	..	..	..	..	..	..	..	13
Bacon and Ham .. .. .	..	..	..	..	..	..	..	212 $\frac{1}{2}$
Sausage .. .. .	..	..	..	..	..	..	..	66 $\frac{3}{4}$
Fish Cakes .. .. .	..	..	..	..	..	..	..	7
Oats .. .. .	..	..	..	..	..	..	..	18
Dried Prunes .. .. .	..	..	..	..	..	..	..	11
Ground Almond .. .. .	..	..	..	..	..	..	..	12
Cake .. .. .	..	..	..	..	..	..	..	78
Ice-cream and Ice-lollies .. .. .	..	..	..	..	..	..	..	39
								862

Milk.

There were 47 retail milk sellers in the district, 38 of whom sold only sterilised milk at shops. The district is in a specified area and only designated milk in capped bottles is retailed. The Council requested milk suppliers to make milk available in half-pint containers but the approach was unsuccessful.

The Council authorised proceedings against a milk dealer for depositing bottled milk where it was exposed to the risk of contamination. Proceedings were withdrawn on the dealer making satisfactory arrangements in accordance with the Milk and Dairies Regulations, 1949.

Several warnings were given in connection with leaving empty milk bottles in unsuitable places. The collection of empty bottles leaves much to be desired and missed bottles are all too frequently seen broken on the roads of the district.

Sixty inspections were made.

The following licences for designated milks were issued.

	Dealers	Supplementary
Pasteurised Milk	6	4
Sterilised Milk	43	3
Tuberculin Tested Milk	3	3

The following are details of samples taken for bacteriological examination at the Public Health Laboratory :—

	No. of Samples	No. Satisfactory
Tuberculin Tested (Farm Bottled) Milk ..	8	6
Tuberculin Tested (Pasteurised) Milk ..	9	9
Pasteurised Milk (including School Milk) ..	15	15
Sterilised Milk	9	9

The tests on a sample of Pasteurised Milk were void as the shade temperature was over 65°F.

The County Health Department took the following samples of locally processed milk :—

	No. of Samples	No. Satisfactory
Pasteurised Milk	20	20
Sterilised Milk	18	18

A sample of milk powder taken from a school canteen for bacteriological examination was satisfactory.

The sampling results which included only two adverse reports are considered satisfactory particularly in view of the hot Summer.

Ice-cream and Ice-lollies.

Fifty-one premises are registered for the retail sale of ice-cream, there being three new registrations during the year. No ice-cream is manufactured in the District and only pre-packed ice-cream is sold at registered premises. Several mobile traders sell loose ice-cream.

Seventy-six visits were made to ice-cream premises.

No. of Samples	Percentage	Provisional Grade	Remarks
30	71.43	1	Satisfactory
11	26.19	2	Fair
1	2.38	3	Poor
0	0	4	Unsatisfactory

Forty-four samples of ice-lollies were taken. The manufacture of lollies is almost wholly in the hands of the larger ice-cream producers. Details of samples :—

Water type—36—all satisfactory.

“Cream” type—8—2 unsatisfactory.

Six samples of artificial cream were taken. Five were satisfactory four being sterile. The unsatisfactory specimen had a plate count of 10,000 colonies per milli litre.

Other Food Premises.

	No.
Bakers and Confectioners	10
Butchers	26
Fried Fish Shops	18
Grocers and General Dealers	68
Sugar Confectioners	29
Greengrocers	15
Fishmongers	2
Tripe Dealers	2
Pharmacists	5
Dairies	2
Aerated Water Manufacturers	2
Cafes, Canteens and Catering Premises	11
Public Houses and Clubs	25

Thirty-three inspections of the above premises were made.

Two cases of foreign objects being found in foodstuffs were reported to the Public Health Committee ; in each case warnings were issued to the manufacturers.

Improvements in the sanitary accommodation and general lay out were made at two public houses and new premises were built to replace an obsolete public house. One fish-monger provided a closed front to his shop.

Comprehensive inspections of food premises were deferred pending the coming into operation of new legislation on the 1st January, 1956.

Offensive Trade.

The only offensive trade is a tripe-boiler whose premises are very close to houses. Fortunately the premises are kept in a satisfactory condition. Smoke emission from boiler chimneys resulted in complaints being referred to the Smoke Abatement Officer. Six visits were made.

Hairdresser's Premises.

Sixteen premises are registered under the West Riding County Council (General Powers) Act, 1951.

Mortuary.

Nine bodies were placed in the Council's Mortuary and five post-mortem examinations were carried out during the year.

Pet Animals Act.

One shop was granted an annual licence under this Act. The trade is confined to ornamental fish and cage birds.

Public Cleansing.

The Department is responsible for the collection and disposal of house and trade refuse, salvage, gully cleansing, sewer flushing and the cleansing of public conveniences.

The refuse collection fleet consists of 3 "Karrier" 10 cubic yard vehicles and 1 "Karrier" 7 cubic yard vehicle. There is a need for a serviceable spare vehicle in case of breakdowns and to enable vehicles to be taken off the road for routine overhauls.

For the purposes of refuse-collection the district is divided into three rounds and the frequency of collection was normally 8/10 days. In the first four months of the year collections fell behind due to—shortage of labour, sickness and bad weather. In the Winter months particularly work of this nature offers little attraction and the Department was understaffed for long periods. In addition to the foreman the number of employees varied from 20 to 26.

The foreman's van was replaced by an Austin 5 cwt. van during the year.

The dilapidated condition of Dudley Street garage is a matter of serious concern to the Department ; slates are blown off the roof whenever there is a strong wind and furthermore the building is without any facilities. An early move to improved premises is most desirable.

Tipping was continued at Claypit Lane and it was necessary to start tipping above the intended finished level. At Upper Haugh Quarry tipping was discontinued in June. Due to long spells of hot dry weather and lack of proper control both tips caught fire on several occasions and the Fire Service assisted by the workmen spend considerable time extinguishing these outbreaks. The hot summer also resulted in trouble with crickets despite regular treatment of the tips with insecticide. Progress was made towards the acquisition of a new tipping site.

Details and costs of refuse collection and disposal :—

No. of motor loads of refuse	..	..	..	..	..	4102
Total estimated weight (tons)	..	..	..	..	..	9229
No. of premises from which collections are made	..	..	..	..	..	6161
Nett Cost of refuse collection and disposal :					Approx.	£11661
Cost per ton	..	..	..	..	..	25s. 3¼d.
Cost per premises	..	..	..	..	..	37s. 10¼d.
Cost per 1,000 premises	..	..	..	..	..	£1892/14/3
Cost per 1,000 inhabitants	..	..	..	..	..	£596/15/6

116 more loads of refuse were removed than in 1954. There was an increase in the net cost of £1,137 due to increased labour and material costs.

Salvage receipts decreased by £42 attributage to reduced sales of waste paper owing to labour difficulties. The transfer of salvage operations from Netherfield Lane to the High Street Depot would facilitate this branch of the work.

	T.	C.	Q.	L.	£	s.	d.
Mixed Paper, Cardboard, etc.	..	53	19	0	0	428	11 9
Textiles	..	1	2	1	0	18	13 6
Ferrous Scrap	..	8	16	3	0	46	12 6
		63	18	0	0	£493	17 9

The renewal of 236 dilapidated dustbins was secured after serving 170 informal and 6 statutory notices. 251 visits were made in this connection.

Gullies were emptied periodically by the "S.D." Gully Emptier. This machine was also used for cesspool emptying on re-payment, sewer flushing, pumping out flooded cellars and extinguishing tip fires.

The six males and two females public conveniences were cleansed daily. The High Street convenience was modernised and the floor of the Haugh Road Males convenience was partially re-formed. Three of the males conveniences are unsatisfactory ; it was proposed to erect a new convenience at Warren Vale Road to take the place of the existing convenience. There is a need for an additional convenience near the junction of Willowgarth and Claypit Lane.

The workmen's messroom at High Street Depot was improved and the sanitary accommodation re-built.

Housing Management.

A separate Housing Department was established on the 1st April, 1955, when the following duties were transferred to the Housing Manager—dealing with and checking housing applications, housing allocations, tenancy exchanges and transfers, sub-tenancy applications, investigation of tenants complaints, welfare matters and enforcement of tenancy conditions.

Up to 31st March 154 visits were made in connection with housing applications and 120 visits were made to Council houses.

